FEC FORM 1

STATEMENT OF ORGANIZATION

FORM	1	ORGANIZATION (See instructions)				
. 0	•				Office use only	
1. NAME OF COMMITTE	E (in full)	(Check if nar is changed)		ample: If typying, type or the lines	12FE4M5	1 1
LEADERS	HIP PAC O	F THE US CONGRES	S CANDIDA	TE JOSUE LAROSE		
ADDRESS (numbe	or and atract)	CAMPAIGN FU	NDRAISING	HEADQUARTER .	1111	<u> </u>
(Check if ac is changed)	ldress	P. O. BOX 398	ACH , ,			
			CITY	•	STATE.	ZIP CODE ▲
COMMITTEE'S E	-MAIL ADDF	RESS (Please provide only	one e-mail add	ress)		
(Check if action is changed)		josuelaroseforu	scongress	@live.com		
			1 1 1 1 1		1111	
COMMITTEE'S V	VEB PAGE A	ADDRESS (URL)				
(Check if ac X is changed)		www.pleasecor	tribute.com	n/ 7714 		
2. DATE	M M /	D 2 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
3. FEC IDENTIFICATION NUMBER C C00456152						
4. IS THIS STA	ATEMENT	X NEW (N)	OR	AMENDED (A)		
I certify that I have	examined this	Statement and to the best of	ny knowledge a	and belief it is true, correct and	d complete	
Type or Print Nan	ne of Treasur	er JOSUE LAF	OSE			
Signature of Trea	surer El <u>ec</u>	tronically Filed by JOSI	JE LAROSE	:	Date 05	27 Y 2009
NOTE: Submission	of false, error			the person signing this State		
Office Use Only				For further information confederal Election Commissing Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)